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ABSTRACT

In the past few decades, senior centers have developed at an exponential rate. To investigate elderly citizens' knowledge of senior center activities and services, 250 white older adults (125 center users and 125 nonusers) from a small urban community were personally interviewed about the services and activities provided by their local senior center. An analysis of the demographic data showed that the subjects were mostly married female homeowners with a median age of 71. Annual income was under $7500, and the majority had lived in the community for 50 years. All subjects were aware of the existence of the community senior center and 99 percent could correctly identify its location. Only a small minority of the sample was aware of any services, other than the 83 percent who were aware of the hot lunch program. The local newspaper, family, and friends were the most cited sources of information by nonusers. As would be expected, center users were more aware of activities than nonusers. Dinner parties, cards, square dances, bingo, trips, and clubs, respectively, were the most recognized activities of the senior center. Center users identified the senior center publication as their major source of information. (BL)

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KNOWLEDGE OF SENIOR CENTER ACTIVITIES AMONG THE ELDERLY

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ABSTRACT

This study of the elderly's knowledge of senior center activities shows that the large majority of the aged are unable to identify specific center programs or activities but center users have greater knowledge than nonusers. Traditional predictor variables explain only a small amount of the variation in knowledge. The sources of knowledge cited by the elderly are restricted to newspapers, family and friends, and (in the case of center users) the center publication.

KNOWLEDGE OF SENIOR CENTER ACTIVITIES AMONG THE ELDERLY

One of the most significant developments witnessed by gerontologists has been the almost exponential growth of senior centers in the United States in the past several decades. From their beginning in New York city in 1943, the number of senior centers has increased from 340 in 1966 to over 5,000 in 1975 (United States Senate Select Committee, 1979). Although a substantial body of literature exists on senior centers and their use (Schramm and Storey, 1961; Storey, 1962; Trela and Simmons, 1971; National Council on the Aging, 1975; Hanssen et. al, 1978), gerontologists have failed to systematically investigate the elderly's awareness and knowledge of senior centers.

Since lack of awareness or limited knowledge of senior centers can be important reasons for nonparticipation in them, practitioners as well as researchers can ill afford to be uninformed about these issues. This paper addresses several aspects of this important topic. More specifically, the present research: examines the elderly's knowledge of senior center activities and programs; analyzes the correlates of this knowledge; and identifies the elderly's sources of information for these activities and programs. The need for up to date information on this phenomenon has grown as senior centers have emerged as important components of the elderly support system and have increasingly been identified as "focal points" in the service delivery network (Leanse, 1981).

REVIEW OF THE LITERATURE

The great majority of previous research on the elderly's knowledge of services has not focused on senior centers but rather

has examined services in general. Not surprisingly, research findings on the degree of knowledge of services vary considerably from study to study and from service to service. Lopata (1975) reports 10 percent of a sample of Chicago elderly being aware of an information center for senior citizens although 87 percent thought it was a "good idea". Downing (1957), on the other hand, found that two-thirds of a sample of persons over sixty in Syracuse had heard of a senior club and Strojanovic (1972) reports almost all of a low income elderly sample taken from four southeastern states had heard about one "service" - medicare. Data analyzed from a Canadian sample by Snider (1980a) show that only 10 of 35 services were recognized by at least three-quarters of the elderly respondents. Older adults were more likely to be aware of local health and social service agencies affiliated with national organizations - organizations with considerable media exposure.

Data from a study by the author on the elderly in a New York nonmetropolitan county indicate a fairly large percentage of elderly had "heard of" service programs. Approximately two-thirds have heard of four services (luncheon clubs, senior clubs and center, mini-buses, and medicaid) while roughly one-third were aware of homemaker and information and referral services (Krout, 1981a). The figure of awareness of the information and referral service is noteworthy. This service presumably aids individuals in need of assistance to find out more about the programs that could help them.

While little research has been carried out on knowledge of senior centers specifically, several studies have shown that a majority of the elderly are in fact aware of senior centers when

they are available (Harris, 1977; Krout, 1981b). Unfortunately, researchers have generally asked elderly respondents if they have "heard of" senior centers, and have not actually measured knowledge of specific center programs or activities. Thus, the research can only be interpreted as showing that many elderly are aware that senior centers exist, but not as indicating knowledge of what actually goes on in such places (Krout, 1981c). One of the few attempts to probe more deeply into the elderly's knowledge of services (not senior centers) speaks to this point. Snider (1980b) reports that for 75 percent of the health and social programs a sample of elderly Canadians were aware of, not even one specific service provided by that program could be identified. This finding underscores the need to distinguish between familiarity with a program and knowledge of what it is or does.

Gerontologists have also conducted research to determine who among the elderly are more or less likely to be aware of services and senior centers. The author's work on the nonmetropolitan elderly has shown that those elderly who were better educated, female, and married were aware of more social service programs than their counterparts (Krout, 1981). Snider (1980a, 1980b,), on the other hand, reported the awareness of health and social services was not strongly associated with demographic factors such as sex. Education, prior health service use, and monthly income were the strongest predictors of awareness in his study.

However, most research on the correlates of service and senior center knowledge has operationalized this variable as a dichotomy and has not examined correlates of the number of specific activities the elderly are aware of. The present study goes beyond much of the

previous research by investigating the elderly's ability to identify specific senior center programs.

METHODOLOGY

The data analyzed in this paper were collected via in depth personal interviews with a sample of age sixty and over residents of a small urban community. The interviews were conducted between November, 1981 and February, 1982 with a 88 percent successful completion rate. Descriptive statistics were used to show levels of senior center knowledge and multiple regression was used to identify the variables which were significantly related to this phenomenon. To facilitate this analysis, two sub-samples of elderly were interviewed. The first, a sample of 125 center users, was randomly selected from the 1981 master sign in roster of the local senior center. The second sample of 125 nonusers was drawn randomly from a list of age sixty and over community residents compiled from the county voter registration lists. The names of individuals who appeared on the center's roster were removed from the nonuser list. The final sample then consisted of 250 elderly. The two sample approach was used to allow comparisons of knowledge between senior centers users and nonusers. Presumably, senior center users should have high levels of knowledge of center programming.

Knowledge of programs was measured by the ability of elderly respondents to identify (without prompting) services and activities they think were available at or through the center. The independent variables used in the regression analysis of program knowledge included socio-demographic characteristics of the respondents

(age, sex, income, marital status, education, employment status, home ownership, and whether or not the respondent lived alone), levels of interaction with informal networks of support (neighbors, friends, and children), self assessment of health and physical mobility, the number of years lived in the community and at the present address, and whether or not the respondent belonged to a senior club.

The senior citizen center studied as a part of this project is a not for profit multi-purpose senior center providing recreation, education, health, information and referral, transportation, nutrition, luncheon club, home delivered meals, out reach services as well as a large number of social activities for the elderly. Established in 1967 and funded by the city and county, the center is primarily run by nonpaid staff although a number of employees of the county Office for the Aging have offices there.

Sample

Table 1 presents data for selected background characteristics

(Table 1 about here)

of this sample. Seventy percent were female, fifty percent were over age 70 (median age almost 71), almost sixty percent were married and one-third lived alone. Forty-five percent reported annual household incomes of under $7,500 but ninety percent were homeowners. The median years of education was 10.8. It should also be noted that respondents showed a high degree of residential stability. They had lived an average fifty years in the community and twenty nine years at their present address. All of the respondents were white.

A comparison of these sample characteristics with national data on the 65 and over population (Soldo, 1980) reveals both similarities and differences. The present sample reported lower household incomes but were more likely to own a home and a car than the national elderly average. And while the aged studied here match the national data closely on percent married and age seventy and over, they were more likely to be female and reported considerably higher education levels. Finally, the elderly studied in this research showed a remarkable degree of residential stability.

FINDINGS

Awareness of senior center activities

All of the 250 elderly interviewed as part of this project were aware that a senior citizen center was located in their commmunity and 99 percent were able to correctly identify its location. Thus, it is evident that even those who were not participants in any center activities were aware of the center. This, of course, is a very high degree of awareness for an elderly population and is probably due to the following factors: the community in which the survey was conducted is quite small, the aged people interviewed have lived in the community an average (not median) 58 years, and the senior center is highly visible in that it is housed in an identifiable physical structure.

This picture of awareness changed quite drastically when respondents were asked to identify particular kinds of services and activities available at or through the center. The data in Table 2 show that for the entire sample, "dinner parties" was the

most recognized activity followed by "cards", "square dances", "bingo", "trips", and the two senior citizen clubs that hold weekly meetings at the center. Most of these were recognized by approximately one-third of the total sample. Table 2 also presents a breakdown of program awareness by whether or not an individual was an active participant in the center. Not surprisingly, senior center participants were much more likely to be aware of the various activities.

Respondents were also asked if any of the community services listed in the methods section were in fact available through the senior center (they all were). As data in Table 2 show, only a small minority of the sample knew of this availability except in the case of the hot lunch program (83.6 percent). Approximately only one in five knew that the transportation and information/referral were available, one in seven the meals on wheels program, and one in sixteen the in home services. Once again, large differences existed between senior center participators and non-participators in terms of awareness of the availability of community services through the center.

To better understand the factors associated with awareness of senior center activities, a summed awareness score for each respondent was produced by totaling the number of activities each individual was aware of. As data in Table 3 show, seven percent of the sample were not aware of any center activities, 12 percent were aware of one, 10 percent of two, 14 percent of three, and 11 percent of four. Almost 50 percent of the sample was aware of five or more programs. However, as data in Table 3 also show, those who

did not participate in the center knew of far fewer activities. Whereas two-thirds of the nonparticipants were aware of three or less services, more than half of the participants were aware of seven or more activities.

A multiple regression analysis was carried out to determine the relationship of each independent variable with the summed knowledge score. The data presented in Table 4 show that almost 50 percent of the variation was explained for the total sample. However, all but three percent of this explained variance can be attributed to one variable, senior center participation. In addition to this variable, club membership and years lived in the community were also significantly related to activity awareness. Senior club members were aware of more activities as were those who had lived more years in the community.

The same regression run for nonparticipants showed only 15 percent of the variation explained with club membership as well as years lived in the community and at the present address significantly associated with awareness. Only two betas had significant f-value for participators - sex and income. Females and those with higher incomes had greater awareness. Here only 17 percent of the variation was explained.

Sources of senior center information

Data presented in Table 5 show the sources that provide information about the senior center to the elderly. For the total sample, one third of the respondents identified the local newspaper and friends or neighbors and one sixth cited

the senior center publication as sources of information. Once again, we see considerable differences between participants and nonparticipants. For the former, the senior center publication was by far the most important source of information and the newspaper and friends or neighbors were second and third. Nonparticipators, on the other hand, reported only two sources of information as important - the newspaper and friends or neighbors. Evidently, the senior center publication does not get to the nonparticipants. Neither group indicated that formal agencies, churches, social clubs, or work organizations played any role at all in providing information about the center. Radio and television were also of little importance.

DISCUSSION

Several observations can be made concerning the data presented in Tables 2 and 3. First, the elderly who did not participate in the center were not aware of the types of activities found there or that the major aged social services in the community were directly or indirectly available through the center. In fact, for only one activity (dinner parties) were more than 30 percent of the nonparticipators aware of its existence. Less than 10 percent of the nonparticipators were aware of the centers connection with community services in five of six instances even though many more of them were aware of the service itself. Second, while center participants on average were much more knowledgeable about center activities than nonparticipants, only a relatively small

percentage of the center participants were aware of most of the different types of activities or were aware of the availability of the community services. Less than 40 percent of the center participants knew of the community services in five out of six cases. These findings underscore the lack of knowledge among the elderly about senior centers and their association with other community services. They also indicate that many center participants apparently attend the center for a specific purpose and do not have a very good understanding of the range of activities or functions that comprise the center as a whole.

Not surprisingly, whether or not an elderly respondent participated in the center was the strongest predictor of senior center knowledge. Most of the independent variables included in the analysis did not have significant beta coefficients and the correlates of knowledge were different for nonparticipants versus participants. Two basic socio-demographic characteristics were related to knowledge among the participants-sex and income. These variables were not found to be associated with knowledge of senior center activities for nonusers. The findings suggest that length of residence in the community had a positive impact on knowledge of activities as did membership in a senior citizen club. Perhaps this is because nonparticipators with either of these characteristics were more likely to have had contact with center users and thus have obtained knowledge about the center.

This observation is supported by the finding that friends or neighbors were the second most often cited source of senior center information for nonparticipants.

The data on sources of senior center information are also noteworthy. Center nonparticipants indicated that they learned about the center from the newspaper or friends while participants noted these sources as well but indicated their major source of information was the senior center publication. Sources such as radio, formal agencies, and churches apparently play a very small role in informing the elderly about programs designed for them. These findings clearly suggest that a number of existing organizations could be more fully utilized as conduits of information about senior centers. They also point out the limited circulation of a potential gold mine of senior center information for nonusers and the uninformed - the senior center publication. As a most comprehensive and up-to-date publication on the center programming and activities, this senior center news magazine clearly may not be directed at those most in need of information about the center.

SUMMARY AND CONCLUSIONS

This study presented findings on the knowledge of senior center activities and services, the correlates of this knowledge, and the sources of information about senior centers for a sample of 250 elderly. While all of the respondents were aware of the senior center, many of the centers activities were not known to them. Knowledge of general elderly services

was particularly lacking. Senior center participants had much more knowledge of the activities and services than nonparticipators. Only several sources (newspaper, friends or neighbors. senior center publication) were identified as providing information about the senior center and it would appear that center publications could be more fully utilized as an educational medium.

The data presented here suggest that variables traditionally used as explanatory factors in gerontological research are not very successful in accounting for variation in the elderly's knowledge of senior centers. More systematic research needs to be carried out to determine how different complexes of variables influence this phenomenon.

In some ways, the findings of this research call into question the uncritical reliance on senior centers as a major component in the formal elderly support system. For if, as the data for this sample indicate, elderly nonparticipants have very little knowledge of center activities or of the community services connected with the center, it is possible that these elderly might not avail themselves of needed services. At the same time, it may also be that the low levels of center knowledge among nonusers simply reflect their lack of interest in or need for the activities and services available at the center.

It should be obvious that a similar study conducted in a different setting with another senior center population might produce substantially different results. A better understanding of senior center and user population types might aid the investigation of center

knowledge. In conclusion, more research on this important topic is necessary. Very little attention has been paid to the question of the elderly's knowledge of senior center activities. It seems ironic that so little is understood about what the elderly themselves know. The elderly's knowledge not that of professional gerontologists is a much more salient factor in the lives and behavior of the aged.

TABLE 1

SELECTED BACKGROUND CHARACTERISTICS
OF ELDERLY RESPONDENTS (N=250)

Characteristic	
Sex	
% male	30
% female	70
Age	
%60-65	20
% 66-69	26
% 70-74	28
% 75 or older	25
median age	70.8
Marital Status	
% married	58
% widowed	30
% never married	8
% divorced	4
Living Arrangement	
% live alone	34
% live with others	66
Annual Household Income	
% less than $5,000	20
% $5,000-7,499	25
% $7,500-9,999	22
% $10,000-14,999	21
% $15,000 or more	12
Education	
% 8 years or less	32
% 9-11 years	24
% 12 years	30
% 13 or more years	14
median years	10.8
Length of Residence	
median years in community	58.4
median years at present address	29.4
Home Ownership	
% own	90
% rent	10

TABLE 2

PERCENTAGE OF RESPONDENTS IDENTIFYING ACTIVITIES AND COMMUNITY SERVICES AVAILABLE THROUGH THE SENIOR CENTER

Activity	Total Sample (n=250)	Percent Aware Participators	Nonparticipators
Center Activities			
Dinner parties	43	62	31
Cards	37	59	24
Square dances	35	56	23
Bingo	33	58	17
Trips	31	36	29
Senior club	30	60	10
Billiards	24	43	11
Exercise	22	47	7
Senior club	19	40	7
Crafts	19	38	7
Bowling	4	27	5
Sewing	8	19	3
Library	5	10	1
Golf	4	6	2
Community Services			
Luncheon program	84	98	76
Transportation	22	41	9
Information/referral	20	36	9
Meals on Wheels	14	22	8
Homemaker	7	9	6
Nursing	6	7	5

TABLE 3

SENIOR CENTER ACTIVITY AWARENESS SCORE

Number of Activities	Total Sample (n=250)	Percent Participators	Non-Participators
0	7	0	12
1	12		19
2	10	0	16
3	15	5	20
4	11	10	12
5	8	7	8
6	11	20	5
7	6	9	5
8	8	16	2
9	7	16	1
10 or more	6	14	0

TABLE 4

BETA COEFFICIENTS SHOWING THE RELATIONSHIP BETWEEN SELECTED INDEPENDENT VARIABLES AND SUMMED SENIOR CENTER ACTIVITY KNOWLEDGE SCORE

Independent Variable	Betas		
	Total Sample	Non Participators	Participators
Senior Center Participation	-.598***	---	---
Club Membership	-.112***	-.202***	-.164
Self Assessed Health	-.038	.026	-.150
Age	-.089	-.111	.042
Years in Community	.106***	.329***	.121
Years at Present Address	.073	.217**	NO
Sex	.047	NO	.275*
Mobility	-.058	-.053	-.084
Employment Status	.037	-.018	.199
Income	-.037	-.105	.244*
Neighbor Contact	-.037	-.087	.050
Friend Contact	.029	.101	-.187
Child Contact	-.017	.067	-.138
Live Alone	-.018	.024	.021
Marital Status	.016	.041	-.082
Home Ownership	NO	.029	-.070
Education	NO	-.013	.030
R	.703	.392	.418
R^2	.495	.154	.174

* Significant at .05 level
** Significant at .01 level
*** Significant at .001 level
NO-Variable not entered into equation due to low F value

TABLE 5

SOURCES OF SENIOR CENTER INFORMATION

Source	Percentage of Respondents Indicating a Source		
	Total Sample	Participators	Non Participators
Newspaper	36	21	46
Friend or Neighbor	32	19	41
Senior Center Publication	16	42	1
Relative	6	2	8
Radio or TV	5	6	4
Spouse	3	2	4
Helping Agency	0	0	0
Church	0	0	0
Social Club	0	0	0
Work Organization	0	0	0

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